

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	WNP		06-27-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TH	1118	8-15-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	3	
2	✓	13	
3	✓	29	
4	✓	29	
5	✓	2	
6	✓	0	
7	✓	0	
8	✓	0	
9	✓	0	
10	✓	0	
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45	✓	0	
46	✓	0	
47	✓	0	
48	✓	0	
49	✓	0	
50	✓	0	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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30 553 N.W.  
5/1/01